

WARNERS' STELLIAN COMPANY, INC.
CREDIT APPLICATION

Fax (651) 726-1682

Date: _____

1. Complete Legal Name of Firm _____
Mailing Address _____
City/State/Zip _____
Billing Address (if different) _____

2. Business Phone No. _____ Fax No. _____

3. Business Type: Incorporated () Sole Proprietorship () Partnership () LLC ()
If Sole Proprietorship or Partnership – SS# and Home address is required

4. Professional Memberships (circle all that apply) NARI, BATC, NICBA, Other _____

5. Principals (owners/Officers)

Name Address SS#

Name Address SS#

Name Address SS#

6. Accounts Payable Contact _____
(Name) (Phone No.)

7. This firm has been in business since _____ 7. Credit line requested \$ _____

8. Trade References (Please list Major Vendors (Name, Address, City, Zip, Contact))

1. _____	2. _____	3. _____
_____	_____	_____
_____	_____	_____
_____	_____	_____
(Phone No.)	(Phone No.)	(Phone No.)
_____	_____	_____
(Fax No.)	(Fax No.)	(Fax No.)

9. Bank _____ Account# _____
Address _____

10. Are Purchase Orders Required? Yes () No ()

11. Tax Exempt? Yes () No () A copy of a Tax Exempt Certificate MUST be on file.
Tax Exempt Number _____

12. Financial Statement: Unless otherwise waived, please attach a copy of your current Financial Statement.

13. Personal Guaranty: Unless otherwise waived, Warners' Stellian Appliance Company, Inc. (WARNERS' STELLIAN) requires a personal guaranty in connection with its credit applications. Please sign the following Personal Guaranty to process this Credit Application.

PERSONAL GUARANTY

For good and valuable consideration, the receipt whereof is hereby acknowledged, and further in consideration of the credit given and hereafter to be given by Warners' Stellan Appliance Company, Inc.. to _____ (name of customer) a Minnesota _____ (corporation/partnership/LLC/LLP) in which I have a financial interest (hereinafter called the Customer), I hereby personally guarantee to WARNERS' STELLIAN, its assignees and transferees, the payment of all amounts, invoices or other indebtedness of the Customer whether said amounts, invoices or other indebtedness be incurred before or after the date hereof. This is a continuing guarantee, and I agree that all terms and conditions of the Agreement above and on the reverse side hereof shall be binding on me personally in addition to the Customer.

Signature: _____

Date: _____

14. Applicant and/or the Personal Guarantor listed above shall be liable for all collection costs, including employee time and expense and all attorneys' fees and costs incurred in either collection of and/or protection of WARNERS' STELLIAN interests in past due accounts. The parties expressly agree that if WARNERS' STELLIAN refrains from collecting interest due on customer's account in a given case this shall not be deemed a waiver, modification or other limitation on WARNERS' STELLIAN right to collect such interest in future dealings with Applicant herein or any other applicant.

15. My/Our signature (s) (below) signifies that I/We understand Warners' Stellan payment terms of sale and intend to comply with them.

16. I/We also understand that Warners' Stellan intends to use the information provided in this credit application to obtain credit information on my/our business and/or me/us (as individuals) in order to make an informed decision on our credit worthiness. My/Our signatures (s) (below) grants Warners' Stellan the authority to investigate our credit.

Owner/Officer's Signature

Date

Owner/Officer's Name & Title (printed or typed)

Owner/Officer's Signature

Date

Owner/Officer's Name & Title (printed or typed)

Personal Guarantor

Date

Personal Guarantor 's Name (printed or typed)

Please Complete Application in Full

Company Name _____